



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

(CFA-4)  
Summary Sheet

FILE NUMBER

4647

TOTAL PAGES IN ENTIRE CFA-4 REPORT

5

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?

☐ Yes

☒ No

## COMMITTEE INFORMATION

1. Full name of committee (as on Statement of Organization) ☐ Check if this is a new name

Hall, Render, Killian, Heath & Lyman, P.S.C. Political Action Committee

2. Acronym or abbreviated name, if any

HRKHL-PAC

3. Committee telephone number

(317) 633-4884

4. Mailing address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

ONE AMERICAN SQUARE, SUITE 2000, BOX 8206

5. City, state, ZIP code

INDIANAPOLIS IN 46282

6. Party affiliation (if applicable)

## CANDIDATE INFORMATION (For Candidate's Committee Only)

7. Full name of candidate (include any nickname)

8. Party affiliation or if independent

9. Office sought (include district number, if any. **Not required for exploratory committee.**)

10. County of residence

## TYPE OF REPORT

11.  
Annual

## CONVENTION CANDIDATES ONLY

12. Check one:

☐ Pre-Convention

☐ Post-Convention

12. Reporting period:

From: 01/01/2013

Through: 12/31/2013

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

154.00

14. Cash on hand and investments January 1, current year.

154.00

## CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

12,644.00

12,644.00

15b. Unitemized

0.00

0.00

15c. Add lines 15a, and 15b in both columns

SUBTOTAL

12,644.00

12,644.00

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

12,798.00

12,798.00

## EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

12,644.00

12,644.00

17b. Unitemized

0.00

0.00

17c. Add lines 17a and 17b in both columns

SUBTOTAL

12,644.00

12,644.00

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

154.00

154.00

19. Debts OWED BY the committee (use Schedule D)

0.00

20. Debts OWED TO the committee (use Schedule E)

0.00

## CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Signature Included

Title

Treasurer

Date

01/13/2014

Signature of Candidate (if applicable)

Signature Included

Date

01/13/2014

**WARNING:** Any information contained in this report may not be copied for sale or used for any commercial purpose.  
(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)

## FOR OFFICE USE ONLY

Filed: Online  
1/13/14 3:02 pm

*Elizabeth A. White*

JAN 14 2014

**FILED**



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OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totalled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

4647

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Hall, Render, Killian Heath & Lyman PC One American Square, Ste. 2000 Indianapolis IN 46282	Contribution: Direct	2,500.00	2,500.00	02/05/2013
					J. Ullom
2	Hall, Render, Killian Heath & Lyman PC One American Square, Ste. 2000 Indianapolis IN 46282	Contribution: Direct	1,000.00	3,500.00	05/07/2013
					J. Ullom
3	Hall, Render, Killian Heath & Lyman PC One American Square, Ste. 2000 Indianapolis IN 46282	Contribution: Direct	8,000.00	11,500.00	09/23/2013
					J. Ullom
4	Hall, Render, Killian Heath & Lyman PC One American Square, Ste. 2000 Indianapolis IN 46282	Contribution: Direct	1,000.00	12,500.00	10/09/2013
					J. Ullom
5	Hall, Render, Killian Heath & Lyman PC One American Square, Ste. 2000 Indianapolis IN 46282	Contribution: Direct	144.00	12,644.00	12/31/2013
		Deposit to cover 2014 service fees			J. Ullom
SUB TOTAL THIS PAGE OF SCHEDULE A			\$	12,644.00	
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY ( Enter total on ITEM 15a of the Summary Sheet )			\$	12,644.00	

**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)**(CFA-4 SCHEDULE B)  
Itemized Expenditures**

**INSTRUCTIONS:** Please type or print legibly in **BLACK INK** all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

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4647

Page 1 of 3

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code: Contributions 1 INDIANA REPUBLICAN PARTY 47 S. MERIDIAN ST., 2ND FLOOR INDIANAPOLIS IN 46204		Direct  Purpose: contribution	2,500.00	2,500.00	02/05/2013
Code: Contributions 2 Marion County Republican Party 47 S. Pennsylvania Street, Suite 300 Indianapolis IN 46204		Direct  Purpose: contribution	1,000.00	1,000.00	05/17/2013
Code: Contributions 3 Friends of Indiana Hospitals One American Sq, Box 82063 Indianapolis IN 46282	- PAC	Direct  Purpose: PAC Contribution for State Senate Caucuses	2,000.00	2,000.00	09/18/2013
Code: Contributions 4 Friends of Indiana Hospitals One American Sq, Box 82063 Indianapolis IN 46282	- PAC	Direct  Purpose: Contribution to PAC for State House of Representatives	2,000.00	4,000.00	09/18/2013
Code: Contributions 5 Friends of Indiana Hospitals One American Sq, Box 82063 Indianapolis IN 46282	- PAC	Direct  Purpose: Contribution to PAC for State Senate	2,000.00	6,000.00	09/18/2013
Code: Contributions 6 Friends of Indiana Hospitals One American Sq, Box 82063 Indianapolis IN 46282	- PAC	Direct  Purpose: PAC contribution for State House of Representative Caucuses	2,000.00	8,000.00	09/18/2013
Code: Contributions 7 Marion County Democratic Party 148 E. Market St, Ste. 300 Indianapolis IN 46204		Direct  Purpose: sponsorship of legal reception	1,000.00	1,000.00	10/10/2013
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 12,500.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



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**(CFA-4 SCHEDULE B)  
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	OFFICE SOUGHT (if applicable)				
Code: Operations 1 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	12.00	01/31/2013
Code: Operations 2 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	24.00	02/28/2013
Code: Operations 3 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Contribution	12.00	36.00	03/31/2013
Code: Operations 4 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Contribution	12.00	48.00	04/30/2013
Code: Operations 5 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	60.00	05/31/2013
Code: Missing 6 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Contribution	12.00	72.00	06/30/2013
Code: Operations 7 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	84.00	07/31/2013
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 84.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code: Operations 1 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	96.00	08/31/2013
Code: Operations 2 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	108.00	09/30/2013
Code: Operations 3 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	120.00	10/31/2013
Code: Operations 4 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	132.00	11/30/2013
Code: Operations 5 National Bank of Indianapolis 107 N. Pennsylvania Indianapolis IN 46204		Direct  Purpose: Service Charge	12.00	144.00	12/30/2013
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 60.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 12,644.00		